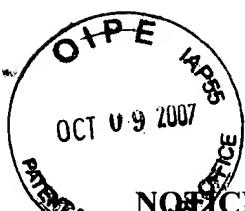


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SGD/PAT/mme
October 4, 2007



PATENT APPLICATION
DOCKET NO. 1036.2001-006
*AF/16K3
JF*

NOTICE OF APPEAL FROM THE EXAMINER
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Applicant: Arnold Glazier

Application No.: 09/738,625 Group: 1643

Filed: December 15, 2000 Examiner: Canella, Karen A.

Confirmation No.: 2855

For: SELECTIVE CELLULAR TARGETING: MULTIFUNCTIONAL
DELIVERY VEHICLES, MULTIFUNCTIONAL PRODRUGS, USE AS
ANTINEOPLASTIC DRUGS

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

10-04-07

Date

Signature

Typed or printed name of person signing certificate

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision dated May 4, 2007 of the Examiner finally rejecting claims 30-33. The item(s) checked below are appropriate:

1. Applicant hereby petitions to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated May 4, 2007 for two months from August 4, 2007 to October 4, 2007.

2. A [] month extension of time to respond to the Office Action Made Final dated [] was filed on [] with payment of a \$[] fee.
 Applicant hereby petitions for an additional [] month extension of time to respond to the Office Action Made Final.

10/04/2007 EARRGAY1 09326376 09738625

10/04/2007
2007-07-03
2007-07-03

3. Fees are submitted for the following:

<input checked="" type="checkbox"/>	Extension of Time for two months	\$230
<input type="checkbox"/>	Additional Extension of Time:	
	Fee for Extension ([] mo.)	\$[]
	Less fee paid ([] mo.)	\$[]
	Balance of fee due	\$[]
<input checked="" type="checkbox"/>	Notice of Appeal	\$255
<input type="checkbox"/>	Other	\$[]
	TOTAL	\$485

4. The method of payment for the total fees is as follows:

- A check in the amount of \$485.00 is enclosed.
- Please charge Deposit Account No. 08-0380 in the amount of \$[].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

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Concord, MA 01742-9133

Dated:

October 4, 2007